Author's response to reviews

Title: Research workshop to research work: initial steps in establishing health research systems on Malaita, Solomon Islands

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Author's response to reviews: see over
17 October 2010

Dear HARPS Editorial team,

MS: 1932017675412275 - Research workshop to research work: initial steps in establishing health research systems on Malaita, Solomon Islands

Thank you for the opportunity of re-submitting this Commentary. We have carefully considered the two reviewers’ comments and have adjusted the manuscript to reflect these considerations. All changes made to the manuscript are identifiable in blue text for your convenience. Text which has been removed is detailed below.

In response to comments made by Bob Dick (Reviewer 1) we have changed the following.

1. “Either say more about the negotiation of the university-community relationship, or reword the abstract to make it clear that this isn’t covered.”

Abstract
Page 2 paragraph 1:

REMOVED
In September 2008 an invitation was extended to health researchers from James Cook University, Queensland, Australia to facilitate a health research workshop at Atoifi Adventist Hospital.

outlines the ensuing

ADDED in blue

This brief commentary describes an ‘Introduction to Health Research’ workshop delivered at Atoifi Adventist Hospital

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Page 5 paragraph 1:

*REMOVED:*
...for all members of the diverse population of East Kwaio has been an ongoing challenge since the hospital opened in 1965

*ADDED in blue*

The hospital is located in an area of great ethnic and religious diversity. Most people in the immediate coastal area live in large villages of up to 500 people and belong to one of five major Christian denominations. People in the nearby mountains live in small family hamlets and practice Ancestral religion. Many of people who practice Ancestral religion are unable to access hospital services because the entire hospital building is culturally taboo due to the maternity ward being located within the hospital building. This means it is not possible to enter the hospital without serious social, spiritual and cultural consequences requiring compensation to the ancestral spirits. After managing the medical laboratory at AAH 1992-1994, DM subsequently (2000 – 2006) used a participatory action research approach to collaboratively investigate barriers to health care at AAH and collective approaches to provide culturally appropriate health care for people who practice Ancestral religion. During this period enduring personal and professional relationships were established with many AAH employees and community leaders [9-12].

Page 5 paragraph 2:

*ADDED in blue*
In September 2008, DM arranged for AAH Director of Nursing, AAH Mental Health Nurse and EK (a community chief) to travel to Cairns, Australia to deliver a presentation on incorporating spiritual paradigms into mental health services at AAH, from both an institutional and community perspective. While in Cairns these men met with DM and AC and discussed ways to build on collaborative health research opportunities and strengthen health research systems at AAH/ACON.

2. “Consider providing more detail about how the “active learning” was achieved.” We have included the following:

Page 7 paragraph 1:

*ADDED in blue*

Active learning methodologies were employed to allow participants to consider the new ideas and try them out[15]. This was enacted by creating spaces for individual reflection, discussions in pairs and small group activities.

3. “Add a sentence on why you used an appreciative inquiry frame for the evaluation at the 7-week follow-up.”

Page 8 paragraph 3:

*ADDED in blue*

MRM, RA, HH and EK used Appreciative Inquiry methodology[17] to reflect upon the experience of the one-week workshop using a strengths approach and to build energy and research capacity for future research. Four questions were considered:
Discussions between AAH/ACON, JCU and other institutions are continuing for further research collaboration at AAH and surrounding communities.

**ADDED in blue (to update further research progress since initial submission)**

Two of these (RA and HH) travelled to Cairns, Australia in September 2010 to present the process and outcomes of the research workshop with MRM at the 2010 Fulbright Symposium [18]. This led to a further application for funding to for a collaborative project to investigate a number of Neglected Tropical Diseases at AAH and surrounding communities.

**Page 7 paragraph 2:**

**ADDED in blue**

Research planning, methods and reporting were discussed using examples from facilitators’ previous research in Solomon Islands and Australia. That research is underpinned by the ‘worldview’ of the researcher was explored.

In response to comments made by Peter Westoby (Reviewer 2) we have carefully considered the following comments. This paper was written as a description of the workshop process and subsequent action using of action research methodologies in a majority world country. The limits have been outlined in terms of geography, physical resources, human resources, skill levels etc. We have, in response to PW’s points 2-4, clarified the purpose of the article i.e. a description, increased the generalisability of the findings and increased the literature which underpins the processes employed.
1. Firstly, it is overly descriptive and therefore lacks building an argument towards either new forms of practice or new theory. The section 'discussion' would be more accurately named 'description' - really the section is a description of what happened. Another section called 'discussion' then needs to follow this description arguing for new forms of practice or new theorizing around health research systems in a post-colonial context such as the Solomon’s. The authors need to move from their specific story to some more generalising.

**Page 2 paragraph 2**

*REMOVED*

**Discussion**

*ADDED in blue*

**The Approach**

**Page 6 paragraph 1:**

*REMOVED*

**Discussion**

*ADDED in blue*

**The Approach**

**The Workshop**

*REMOVED*

**Pre-existing**

*ADDED in blue*

long-term

**Page 10 paragraph 2**

*REMOVED*

**Conclusions**

*ADDED in blue*

**Discussion and Conclusions**

**Page 11 paragraphs 1&2**

*ADDED in blue*

Using an action research approach underpinned by decolonising research methodologies allowed Australian and Solomon Islander colleagues to utilise each other’s skills and knowledge to collaboratively design, implement, monitor and evaluate the workshop. Utilising methods which included different options of time, location and
language of delivery contributed to a culturally safe learning environment. Active learning methodologies allowed participants to build upon existing knowledges and more actively participate. The One Minute Reflections allowed rapid monitoring of each session and provided opportunities to modify subsequent sessions in response to participant’s concerns. Having the workshop participants evaluate the workshop utilising skills learned during the workshop (focus group discussion and data coding) and reviewing the results using an appreciative inquiry methodology re-enforced the utility of skills acquired or strengthened during the workshop.

Collaboratively writing this publication and RA, HH and MRM presenting at an international symposium demonstrates the ongoing commitment to collaborative partnership. This paper is a description of an action research approach for a health research workshop at a remote Solomon Islands hospital. However, broader principals of: responding to an issue of concern from within the community; collaboration; honouring multiple knowledges; respect of difference; building on strengths; and flexibility are all relevant for conducting action research in other resource challenged, spiritually diverse and/or post-colonial contexts[19-21].

Page 12 Paragraph 1

REMOVED

to contribute to relevant public health research and practice on Malaita, Solomon Islands.
ADDED in blue

Participants have requested a follow-up workshop to cover a more comprehensive range of topics and to build on the successes of the initial workshop. A regular review of research activities and research infrastructure at AAH could monitor changing capacity and resource needs and collaborative research successes. Strengthening collaborative relationships between AAH, JCU, Ministry of Health and Medical Services (MHMS), Solomon Islands Institute of Medical, Training and Research Institute (SIMTRI) or other research institutions could create further opportunities to enhance health research capacity with the aim to improve health outcomes for people in East Kwaio and Solomon Islands. Ongoing support and collaboration is required at this remote Solomon Islands hospital to ensure initial steps to strengthen health research systems can align with local and national research agendas and ensure progress from ‘research workshop’ to ‘research work’.

2. As per the comment in the abstract ‘the workshop appears to have...’ and the data discussion (p8) the authors need to clearly articulate the limits of their research. The evaluation data is presented without discussion about limits, ways of interpreting data etc.

Page 2 Paragraph 2

REMOVED:

appears to have acted

ADDED in blue

...staff from Atoifi Adventist Hospital and James Cook University (Queensland, Australia) collaboratively designed, implemented and evaluated a health research workshop
The workshop has acted as a catalyst for research activity

**Page 11 paragraphs 1&2**

*ADDED in blue*

Collaboratively writing this publication and RA, HH and MRM presenting at an international symposium demonstrates the ongoing commitment to collaborative partnership. This paper is a description of an action research approach for a health research workshop at a remote Solomon Islands hospital.

3. Finally, the article, particularly in a new proposed discussion section and the conclusion needs to engage with more literature ensuring that there is an interplay between the empirical (the story of the work/evaluation data etc) and the theoretical - what does it mean to do this kind of work in the Pacific, and/or in post-colonial contexts? What does it mean for action-research thinking/theorzing?

**Page 11 paragraphs 1&2**

*ADDED in blue*

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4. A lack of engagement with the literature
Additional literature included following the review is listed below:

1. MacLaren D: Kastom and Health: a study of indigenous concepts of custom, health and and appropriate health care within Kwaio, Malaita, Solomon Islands. Griffith University, School of Public Health; 2000.


Other changes

**Page 13 Paragraph 1**

*ADDED in blue*

Bob Dick and Peter Westoby reviewed this paper and provided many helpful suggestions- thank you both.

Thank you again to the HARPS Editorial team for this opportunity to submit this article to your journal. Please do not hesitate to contact us should you require further information.
Yours Sincerely,

Michelle Redman - MacLaren
Lead Author